

LOBBYING SUPPLEMENTAL REGISTRATION FORM
To be used for changes to registrations and terminations.
2008



Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd floor, Baton Rouge LA 70808, (225)763-8777 or (800)842-6630. No fee is required
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any termination of employment or representations.

1. NAME Haynie Randy K.
Last First MI

2. BUSINESS PHONE 225-336-4143

3. BUSINESS ADDRESS P.O. Box 44032, Capitol Station Baton Rouge, LA 70804
Street and No. City State Zip

MAILING ADDRESS 1465 Ted Dunham Avenue Baton Rouge, LA 70802
Street and No. City State Zip

4. EMPLOYER Self-Employed

5. EMPLOYER'S ADDRESS _____
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes _____ No X

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

FOR OFFICE USE ONLY

Postmark Date: 9/16/08

Supp (amended)

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HAND DELIVERED

SUPPLEMENTAL REGISTRATION FORM



1. Name Louisiana Children's Museum

Address 420 Julia Street, New Orleans, LA 70130

Business or purpose : Education

☒ New Representation X
Does this person pay you: No

If No, who pays you? Not Paid / Volunteer

☐ Terminated Representation as of _____

2. Name Louisiana Oilfield Contractors Association - SIF

Address P.O. Box 51986, Lafayette, LA 70505

Business or purpose :

☒ New Representation X
Does this person pay you: Yes

If No, who pays you? _____

☐ Terminated Representation as of _____

**Amendment(s)
Attached**

3. Name Environmental Chemical Corporation

Address 1240 Bayshore Highway, Burlingame, CA 94070

Business or purpose :

☒ New Representation X
Does this person pay you: Yes

If No, who pays you? _____

☐ Terminated Representation as of _____

4. Name MillerCoors LLC

Address 3939 West Highland Blvd, Milwaukee, WI 53208

Business or purpose :

☒ New Representation X
Does this person pay you: Yes

If No, who pays you? _____

☐ Terminated Representation as of _____

SUPPLEMENTAL REGISTRATION FORM



1. Name Louisiana Children's Museum

Address 420 Julia Street, New Orleans, LA 70130

Business or purpose : Education

☒ New Representation X
Does this person pay you: No

If No, who pays you? Not Paid / Volunteer

☐ Terminated Representation as of _____

2. Name Louisiana Oilfield Contractors Association - SIF

Address P.O. Box 51986, Lafayette, LA 70505

Business or purpose : Workers Compensation Insurance

☒ New Representation X
Does this person pay you: Yes

If No, who pays you? _____

☐ Terminated Representation as of _____

AMENDMENT

3. Name Environmental Chemical Corporation

Address 1240 Bayshore Highway, Burlingame, CA 94070

Business or purpose : Construction Management

☒ New Representation X
Does this person pay you: Yes

If No, who pays you? _____

☐ Terminated Representation as of _____

4. Name MillerCoors LLC

Address 3939 West Highland Blvd., Milwaukee, WI 53208

Business or purpose : Alcohol Beverages

☒ New Representation X
Does this person pay you: Yes

If No, who pays you? _____

☐ Terminated Representation as of _____

Please Remove:

1. Name Montlake Holdings, LLC

Address _____

Business or purpose :

☐ New Representation _____

Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

2. Name AT&T - LA

Address _____

Business or purpose :

☐ New Representation _____

Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

3. Name ICF International, Inc.

Address _____

Business or purpose :

☐ New Representation _____

Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

4. Name Slidell Development

Address _____

Business or purpose :

☐ New Representation _____

Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

9/16/2008

5. Name Wiznia Associates

Address _____

Business or purpose :

☐ New Representation _____
Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

6. Name The Louisiana Group

Address _____

Business or purpose :

☐ New Representation _____
Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

7. Name Miller Breweries West Limited Partnership

Address _____

Business or purpose :

☐ New Representation _____
Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

8. Name Miller Brewing Co.

Address _____

Business or purpose :

☐ New Representation _____
Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

9. Name Miller Products Company

Address _____

Business or purpose :

☐ New Representation _____

Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

10. Name Millers Breweries East, Inc.

Address _____

Business or purpose :

☐ New Representation _____

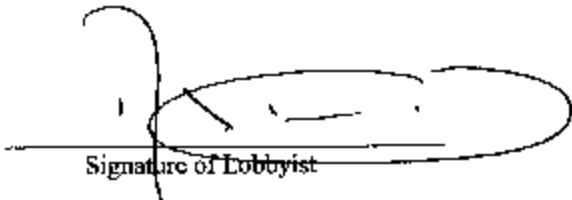
Does this person pay you: _____

If No, who pays you? _____

☒ Terminated Representation as of September 16, 2008

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

